10/049644

								Application or Docket Number					
PATENT APPLICATIO. FEE DETERMINATION RECO Effective October 1, 2001								10/030544					
CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN			
TOTAL CLAIMS			(Column 1) (C			umn 2)	TYP			OR	SMALL	ENTITY	
FOR							R	RATE FEE		┦	RATE	FEE	
			NUMBER FILED NUM			BER EXTRA	BAS	HC FE	E	OR	BASIC FEE)40	
TOTAL CHARGEABLE CLAIMS			minus 20= *		*		×	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 = "				X42=			OR	X84=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT				41	40=			1200	- 	
* If	the difference	e in column 1 is	less than z	<u> </u>			OR	+280=	C / A				
								TAL		OR	TOTAL	140	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SN	IALL	ENTITY	OR	OTHER SMALL			
AMENDMENTA		CLAIMS REMAINING		HIGH	EST	PRESENT			ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO	USLY	EXTRA	P.	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 19	Minus	7V			X	9=	1	OR	X\$18=	FEE	
	Independent	. 2	Minus	*****)	= 0	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	12=			X84=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	X04=		
							+14	40=		OR	+280=		
								OTAL T. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)				_			
AMENDMENT B		REMAINING AFTER		NUMB PREVIO	BER	PRESENT	RA	ATE	ADDI- TIONAL		DATE	ADDI-	
		AMENDMENT		PAID		EXTRA			FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4	2=		OR	X84=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEI	PENDENT	CLAIM					UN			
								40= -0744		OR	+280=		
						t.	ADDIT	OTAL FEE		OR ,	TOTAL ADDIT, FEE		
		(Column 1) CLAIMS		(Colum		(Column 3)							
8		REMAINING AFTER		NUMB PREVIO	BER	PRESENT	RA	TE	ADDI- TIONAL		האדר	ADDI-	
		AMENDMENT		PAID F		EXTRA	1,7	11.	FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***	***********	=	X4	2=		ł	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR	704-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								=0		OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***Off the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***Off the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***Off the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
7	he "Highest Num	ber Previously Paid	For (Total o	r Independer	nt) is the	n 3, enter 3. highest number f	ound in I	he app	propriate box				